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PTO/SE/81 (01-08)

Application Number 10/789.687 Filing Date February 27, 2004 First Named Inventor Peter F. King **POWER OF ATTORNEY** Title WIRELESS MOBILE DEVICES and HAVING IMPROVED OPERATION **CORRESPONDENCE ADDRESS DURING NETWORK** INDICATION FORM UNAVAILABILITY Art Unit 2681 Examiner Name Unassigned **Attorney Docket Number** 022395-001710US I hereby revoke all previous powers of attorney given in the above-identified application. I hereby appoint: 46670 Practitioners associated with the Customer Number: Practitioner(s) named below: Maurio Recistration Number as mylour alternay(s) or agent(s) to presecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: 冈 The address associated with the above-mentioned Customer Number: The address associated with Customer Number: Individual Name Address ΖIp City State Country Telephone Email I am tha: ____ Applicant/Inventor, Assigned of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Skyrature 006 LOKUNN Name GREGOR Title and Company SENIOR VICE PRESIDENT AND GENERAL COUNSEL NOTE: Signatures of all the inveniors or exagness of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one algorithm, see below.

forms are aubmitted.

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